



EVERETT POLICE DEPARTMENT  
3002 Wetmore Ave  
Everett, WA 9201  
(425) 257-8400

## Initial Case Report

Case Report # 2018-00004615

### NARRATIVE

On 1/12/18 at approximately 1233 hours Officer Burns and myself responded to 916 Pacific Ave, Fairfax Behavioral Health Facility regarding an assaultive patient.

Upon arrival we contacted the hospital Charge Nurse, [REDACTED], who advised that patient [REDACTED] had assaulted another patient at the facility. We then spoke with the victim, [REDACTED], who stated he was hit in the chest twice then [REDACTED] placed both of his hands around [REDACTED]'s neck and pushed him backwards. [REDACTED] did not have his airway cut off from this and was still able to breathe. This was witnessed by RN [REDACTED], and RN [REDACTED], who also stated that [REDACTED] "swung" at hospital staff but did not quite hit any of them. All witnesses, and the victim provided written statements on the incident.

I took pictures of [REDACTED] due to the visible marks around his neck being consistent with his statement that [REDACTED] pushed him by his neck. Pictures we downloaded into evidence at the North precinct.

[REDACTED] was asked about the incident and stated that people were trying to steal his belongings. [REDACTED] rambled endlessly even when no one was speaking to him. We were unable to comprehend most of what was said by him.

Because [REDACTED] assaulted another patient causing minor injury, and there were multiple witnesses to the incident, I developed probable cause to arrest him for Assault 4.

[REDACTED] is currently [REDACTED]. Due to his assaultive behavior and the risk he posed to Fairfax staff, he was booked at the Snohomish County Jail for Assault 4.

I completed the superform booking paperwork and issued Criminal Citation 8Z0122448 for Assault IV which was submitted during booking. [REDACTED]'s medical documents and prescription medications were also provided to the Booking Nurse.

No further.

This report was submitted from an electronic device owned, issued, or maintained by a law enforcement agency using my user ID and password. I certify or declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

REPORTING OFFICER / ID #  
Phillips, Michael

APPROVING SUPERVISOR  
Karr, Jonathan

LOCATION SIGNED Snohomish County, WA

DATE SIGNED 01/12/2018

This officer's narrative is complete when an approving supervisor's narrative is attached. Complete report details do not print in this format.

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